

# Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance

長男 の 11
File with: City or Town Clerk or Election Commission
Ending Date: 30/24/2019
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ection year-end report dissolution
Committee Name
Name of Committee Treasurer

Fill in Reporting Period dates: Beginning Date: Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after el Candidate Full Name (if applicable) Committee Mailing Address Telephone Number (optional):

	onone realiset (optional).
SUMMARY BALANCE IN	FORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 2, line 11)	\$ 4086 00
Line 3: Subtotal (line 1 plus line 2)	# 408600
Line 4: Total expenditures this period (page 3, line 14)	\$ 2600,00
Line 5: Ending Balance (line 3 minus line 4)	# 1486,00
Line 6: Total in-kind contributions this period (page 4)	0
Line 7: Total (all) outstanding liabilities (page 4)	# 300.00
Line 8: Name of bank(s) used: EAST BOSTO	N SAVINGS BANK
ommittee Treasurer:	

	21101	70310N	HUINGS SI	7/1/
Affidavit of Committee Treasurer:				
I certify that I have examined this report includ	ing attached schedules and it is, to the	ne best of my knowledge as	nd belief, a true and complete s	tatement of all campaign finance
activity, including all contributions, loans, rece	ipts, expenditures, disbursements, in	-kind contributions and lia	bilities for this reporting period	and represents the campaign
finance activity of all persons acting under the	authority or on behalf of this commi	ttee in accordance with the	requirements of M.G.L. c. 55.	and a spreading the campaign
				Data
Signed under the penalties of perjury:			(Treasurer's signature)	Date:
EOD CANDIDATE EILINGS ONL	**			
FOR CANDIDATE FILINGS ONL	Y: Affidavit of Candidate: (chec	k 1 box only)		
Candidate with Committee  I certify that I have examined this report in activity, of all persons acting under the autincurred any liabilities nor made any exper	ncluding attached schedules and it is thority or on behalf of this committe nditures on my behalf during this rep	to the best of my knowled e in accordance with the re- porting period.	lge and belief, a true and compl quirements of M.G.L. c. 55. I l	ete statement of all campaign finance nave not received any contributions,
Candidate without Committee  I certify that I have examined this report in finance activity, including contributions, locampaign finance activity of all persons ac	acluding attached schedules and it is bans, receipts, expenditures, disburse ting under the authority or on behalt	to the best of my knowled ements, in-kind contributio f of this committee in accor	lge and belief, a true and compl ns and liabilities for this reporti rdance with the requirements of	ete statement of all campaign ng period and represents the M.G.L. c. 55.
Signed under the penalties of perjury:	Je H. all		_(Candidate's signature)	Date: 10-26-15

#### **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

report all receipts. Please include your committee name and a page number on each page.)					
Date Received	Name and Residential Address  Received (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)		
9/23/15	Philip BAldi 33 NAHANT AVE WINTHROP MA	\$250	Self Emp. Bus DWN.		
9/23/15	Philip Barbanti 17 HOLLAND SAUGUS	\$100-			
9/23/15	JOESPH Dion 24 Mountain Aue Saugus	\$100-			
9/23/15	MONICA LAIETTA 6 Birch Crest Bullington				
9/23/15	ARMENE MISSAKIANE 24 St. JAMES. Rd. SAUGUS	101//	Self Emp. Bus. Own.		
9/23/15	LINDA RIBERIO 11 Cedas. St. Saigus	\$100-			
8/21/15	Christopher Riley 7 Ocean View Saugus	\$100-			
9/23/15	TOANNO Rappa 1 Crimson 4 Spigus	\$100-			
9/23/15	Peter Rossetti JR 6 Summit Sargus	#100-			
9/23/15	WILLIAM TALIS 25 Tayor ST SAUGUS	\$200-	AHORNEY		
9/23/15	Joseph Torter 550 Pleasant SI Winthrop	1250-	Bus. Owner.		
Line 9: Total Recei	ipts over \$50 (or listed above)				
Line 10: Total Rece	ripts \$50 and under* (not listed above)	\$2486			
Line 11: TOTAL RECEIPTS IN THE PERIOD					
* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.					

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## **SCHEDULE B: EXPENDITURES**

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.)					
Dods D. C.	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
9/28/15	Kowloon	948 Broadway	FUND RAISER	#945,00	
9/18/15	Sachem Sign Works	124 MAIN ST	Bumper StickERS	\$106.25	
10/5/15	Sachem Sign Works	SAUGUS 124 MAINST	SIGNS	\$318.75	
10/13/15	Sachem Sign Works	SAUGUS 124 MAIN ST	Signs	1105.00	
10/13/15	Sachem Sign Works	Jay Main St	SIGNS	\$50,00	
10/20/15	S.C.T.S.	1 Pierce Memoria	CABLE Ad	\$ 75,00	
		Line 12: Total Expenditures over	er \$50 (or listed above)	2600.	
		Line 13: Total Expenditures \$50	and under* (not listed above)	0	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					
* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized					

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received From Whom Received*	Residential Address	<b>Description of Contribution</b>	Value
* If : - 1-: - 1 - : - : 1 C			
* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report	Line 15: In-Kind Contributions	over \$50 (or listed above)	
the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.	Line 16: In-Kind Contributions \$50 & under (not listed above)		
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

#### **SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

auring this reporting period.				
Date Incurred	To Whom Due	Address	Purpose	Amount
8/20/15	PAUL H. ALLAN	80 Winter ST	LOAN	300-
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) #300 —				